N

Enter your transmittal number

W204287

Transmittal Number

Your unique Transmittal Number can be accessed online: http://mass.gov/dep/service/online/trasmfrm.shtml or call MassDEP's InfoLine at 617-338-2255 or 800-462-0444 (from 508, 781, and 978 area codes).

Massachusetts Department of Environmental Protection

Transmittal Form for Permit Application and Payment

1. Please type or	A.	Permit Information					
print. A separate Transmittal Form		BWP IW 38 1. Permit Code: 7 or 8 character code from permit instructions		Permit for Industrial Sewer User 2. Name of Permit Category			
must be completed							
for each permit		Existing Connection					
application.		3. Type of Project or Activity					
2. Make your		or type or tropostor acting					
check payable to							
the Commonwealth	mmonwealth D. Approant mornation — Tittl of Marvada						
of Massachusetts		MASSPOWER					
and mail it with a copy of this form to		Name of Firm - Or, if party needing this approval is an individual enter name below:					
DEP, P.O. Box						TO SHOW A STATE OF THE PARTY OF	
4062, Boston, MA		2. Last Name of Individual 3. First Name of Individual			4. MI		
02211.		750 Worcester Street	and the second s				
3. Three copies of		5. Street Address	***	04454	440 704 0044	2007	
this form will be		Indian Orchard	MA 7. State	01151	413 731-6611	3007	
needed. Copy 1 - the		6. City/Town	7. State	8. Zip Code	9. Telephone #	10. Ext. #	
		Debby Cartney			@bg-group.com	MECHANICAL MICHANICA CONTROL C	
original must		11. Contact Person		12. e-mail address	(optional)		
accompany your	_	F				er Zangar Artur (2000) (Kilmulainin arturusianna raturusianna (Kilmulainin arturusianna) (Kilmulainin arturusia	
permit application.							
Copy 2 must accompany your		MASSPOWER					
fee payment.		Name of Facility, Site Or Individual					
Copy 3 should be		750 Worcester Street					
retained for your		2. Street Address			The state of the s	at 4 statement of the s	
records		Indian Orchard	<u>MA</u>	01151	413 731-6611		
4. Both fee-paying		3. City/Town	4. State	Zip Code	6. Telephone #	7. Ext. #	
and exempt		205912	04-312	and the first of the second			
applicants must		8. DEP Facility Number (if Known)	9. Feder	al I.D. Number (if Kno	own) 10. BWSC Track	ing # (if Known)	
mail a copy of this transmittal form to:							
transmittai ionii to.	D. Application Prepared by (if different from Section B)*						
MassDEP		Berkshire Environmental Consultants					
P.O. Box 4062 Boston, MA 02211		Name of Firm Or Individual		4111			
		1450 East Street - Suite 6H					
		2. Address					
		Pittsfield	MA	01201	413 443-0130		
* Note:		3. City/Town	4. State	5. Zip Code	6. Telephone #	7. Ext. #	
For BWSC Permits, enter the LSP.	1	Maura Hawkins		•	•		
		8. Contact Person 9. LSP Number (BWSC Permits only)					
	E. Permit - Project Coordination						
	1. Is this project subject to MEPA review? ☐ yes ☒ no						
		If yes, enter the project's EOEA file number - assigned when an					
		Environmental Notification Form is submitted to the MEPA unit:					
	EOEA File Number						
	F. Amount Due						
DEP Use Only	C	aniai Duncininuma					
DEF USE OTHY	Special Provisions:						
Permit No:	 Fee Exempt (city, town or municipal housing authority)(state agency if fee is \$100 or less). There are no fee exemptions for BWSC permits, regardless of applicant status. 						
	Hardship Request - payment extensions according to 310 CMR 4.04(3)(c).						
Rec'd Date:	3.	Alternative Schedule Project (according to 310 CMR 4.05 and 4.10).					
	4.	Homeowner (according to 310 CMR 4.02).					
Reviewer:		1747	\$1,605.00		12/06/2007		
		The state of the s	Oollar Amount		Date		
		W 1 CW W 1 3 3 3 5 6 2 5 6 6 7 1					